	(BEST AL	Allabi e	CODI	•			·
	•	BEST AL		שרטסיי.	plication	or D	ocket Num	ber :
PATENT APPI	LICATION FEE I Effective Decen	DE I EUMINAN	ON RECOF	(475	
CLAIMS AS FILED - PART I / (Column 1) (Column 2)				SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
A	NUMBER FILED	NUMBER	EXTRA	RATE	FEE	1	RATE	FEE
IC FEE					345.00	OR		690.00
AL CLAIMS .	/ 9 minu	6 20 -		X\$ 9=		OR	X\$18=	
PENDENT CLAIMS	minu	18 3 = .		X39=		OR	X78=	· ·
PLE DEPENDENT	CLAIM PRESENT			490			+260≒	, .
a difference in an	lumn 1 is less than	zero, enter "O" in	column 2	+130=	960	OR		
· ·		•		TOTAL	345	OR	OTHER	THAN
CLAIP 21-24-10-1-	MS AS AMENDE Dlumn 1)	(Column 2)	(Column 3)	SMALL	ENTITY	OR	SMALL	
RE	MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT · EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	/9 Minus	. 20	. —	X\$ 9=		OR	X\$18=	
ndependent -	3 Minus	3	-	X39=			X78=	-
IRST PRESENTAT	ION OF MULTIPLE D	EPENDENT CLAIM				OR		
	•			+130=		OR	+260=	
9-15.		•		ADDIT. FEE	L	OR	ADDIT. FEE	
RE	Olumn 1) CLAIMS CMAINING AFTER ENDMENT	(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	- RATE	ADDI- TIONAL- FEE	 .	RATE	ADDI- TIONAL FEE
Total •	9. Minus	-20	·O,	X\$ 9=		OR	X\$18=	
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IRST PRESENTAT	ION OF MULTIPLE C	EPENDENT ÇLAIA		+130=		OR	+260=	
		-,-)//	•	TOTAL ADDIT, PEE		OR	TOTAL ADDIT, FEE	
(C	olumn 1)	(Column 2)	(Column 3)					
RE	CLAIMS MAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	Minus	••		X\$ 9= ·		OR	X\$18=	
dependent •	Minus	***		X39=	•	OR	X78=	
IRST PRESENTAT	TION OF MULTIPLE D	EPENDENT CLAIM	<u> </u>					
	is less than the entry in c	oluma 2. write 10° in o	otuma 3.	. <u>+130=.</u>		OR	.+260=.	
the "Hichest Number"	Previously Paid For IN 1 Previously Paid For IN 1	THIS SPACE is less th	an 20, enter "20."	ADDIT. FEE		OR	TOTAL ADDIT, FEE	

FORM PTO-675

Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE